ELEVATOR MECHANIC LICENSE RENEWAL APPLICATION

State Form 52377 (R2 / 12-05) Approved by State Board of Accounts, 2006

Division of Fire & Building Safety Division of Elevator Safety 402 West Washington Street, W246 Indianapolis, IN 46204 http://www.in.gov/dhs/fire

fax: (317)232-6609 fax: (317)232-0146

ATTACH ADDITIONAL PAGES AS NEEDED TO COMPLETE THIS APPLICATION

1. APPLICANT INFORMATION							
Name:		M#:	Title	:			
Organization Name:		E-mail:	E-mail:				
Work Address:			Telephone Number:				
City: State		:		ZIP Code:			
2. PROOF OF COMPLETION OF CONTINUING EDUCATION							
Submit documentation proving completion of at least 8 hours of continuing education. This continuing education must have been attended and completed within one (1) year before a license renewal. At a minimum this documentation shall include: (1) the date(s) the continuing education was taken; (2) the name of the provider of each course; (3) the name of the instructor for each course; the name of the course(s); and proof that you attended this course. For this continuing education to be accepted, the Department must have approved the continuing education provider(s), the instructor(s) and the curriculum(s).							
3. CRIMINAL HISTORY							
Have you ever been charged or convicted of a crime other than a minor traffic violation?(check one): Yes No If the answer to the above question is yes, the following information needs to be submitted with the application: (1) Each address at which you have resided during the past five years. (2) A current criminal history from every state in which you have resided during the past five years. In Indiana, and from every state in which you have been charged or convicted of a crime (other than a minor traffic violation). A limited criminal history can be obtained from the Indiana State Police (see http://www.in.gov/isp/lch/). (3) Certified copies of all charging instruments from any case in which you have been charged with a crime. This includes, but is not limited to, any probable cause affidavits. (4) Certified copies of any order regarding the final disposition from any in which you have been charged with a crime. This includes, but is not limited to, any plea agreements and sentencing orders. (5) If you were ever assessed any periods of probation, a letter detailing your satisfactory completion of all court-imposed requirements from all involved probation officers. (6) If you have ever been or are certified or licensed as an elevator professional in another state and that state has taken an action to revoke, suspend or otherwise limit your certification or license, include copies of all documents detailing the cause of the action and the final disposition of the action.							
4. APPLICATION FEE							
The application must include payment of the license fee of and Building Services Fund. If paying by <i>Visa</i> or <i>Master C</i> A check or money order for \$100 is enclosed. Payment will be made by <i>Visa</i> or <i>Master Card</i> and the 5. AFFIRMATION I hereby affirm under penalty of perjury that all of the inforknowledge:	Credit (Card Payment form	ard Pay has bee	en completed and is enclosed. Ition is true to the best of my			
Signature:	I	Oate:					

ELEVATOR MECHANIC LICENSE RENEWAL APPLICATION CREDIT CARD PAYMENT

The application must include payment of the license fee of \$100. If paying by *Visa* or *MasterCard*, complete the following information:

Full Name on Credit Card:							
Billing Address	Street:						
	City:		State	ZIP Code			
	Phone Number:						
	Credit Card (check one):	☐ Visa	☐ MasterC	'ard			
Account Number:			_ Expiration Date	(month/year):/			
CVV2 Number (last 3 digits of the number in the signature block on the back of the card):							
• • •	agrees to the obligations set	Signa	ature				